

Form CPF M 102: Campaign Finance Report

Municipal Form

Municipal Form TOWN CLERK'S OFFICE Office of Campaign and Political Finance ARLINGTON. MA 02174

2023 MAR 25 AM 11: 07

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	2/13/23 Ending Date: 3/25/23
Type of Report: (Check one)	MINE CONTRACTOR
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8th day preceding preliminary 8th day preceding elec	ction 30 day after election year-end report dissolution
THE STATE OF STATE	The state of the s
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Candidate Full Name (if applicable)	Committee Name
Office Sought and District	Name of Committee Treasurer
2,00	Del 202474 12101
Residential Address	Committee Mailing Address
E-mail:	E-mail:
Phone # (optional):	Phone # (optional):
STIMM A DV D A I	LANCE INFORMATION:
SUMMART BAI	LANCE INFORMATION:
Line 1: Ending Balance from previous repo	2214.82
Line 2: Total receipts this period (page 3, 1	ine 11) 1000.00
Line 3: Subtotal (line 1 plus line 2)	3214. 82
Line 4: Total expenditures this period (pag	e 5, line 14) 310.89
Line 5: Ending Balance (line 3 minus line	# <i>2903.93</i>
Line 6: Total in-kind contributions this per	riod (page 6)
Line 7: Total (all) outstanding liabilities (p	page 7)
Line 8: Name of bank(s) used: Rockla	ad Trust, Broadway, Arlington
Affidavit of Committee Treasurer:	
I certify that I have examined this report including attached schedules and it is, t	to the best of my knowledge and belief, a true and complete statement of all campaign finance in the campaign finance in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 3/24/33
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (c)	heck 1 box only)
Condidate with Committee Certify that I have examined this report including attached schedules and i activity, of all persons acting under the authority or on behalf of this commincurred any liabilities nor made any expenditures on my behalf during this	it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance ittee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, a reporting period that are not otherwise disclosed in this report.
Candidate without Committee I certify that I have examined this report including attached schedules and i finance activity, including contributions, loans, receipts, expenditures, disb campaign finance activity of all persons acting under the authority or on be signed under the penalties of perjury:	it is, to the best of my knowledge and belief, a true and complete statement of all campaign ursements, in-kind contributions and liabilities for this reporting period and represents the shalf of this candidate in accordance with the requirements of M.G.L. c. 55. Date: 3135133
Signed under the penalties of periury: Wany	(Candidate's signature)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received Name and Residential Address (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
3/1/23	NAGE 159 Bargin Parkway QUINCY MA 02169	\$250.60	NAGE Union
3/10/23	NAGE-292 159 Burgin Parkway Quincy, MA 02169	\$ 350.00	N46E Union R1-292
3/10/23	Men Hughes 20 Webster St. Arl., MA 02474	\$100,00	
2/13/23	Mary O'Connor 181 Concord Turnpile Art, MA 02476	#300.00	Allorney
3/11/23	Mary De Courcey 7 CHES WICK Rd AFL MA DOUTH	\$100.00	
	1000.00		
- 1	8214,82		
	ED 103.93		
		7) KOUL	(n) gnessesou (iis) lout se sant
	reprine Gunden	vi halsa	
Retucts			
	10		
Line 9: Total Rece	ipts over \$50 (or listed above)		
Line 10: Total Rece	eipts \$50 and under* (not listed above)		

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)	
Date Received	(aiphabeneai usung required)	Amount	(tor contributions of \$200 or more)	
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A 210 00	subje HILL 15 305	0723 10	17/23 Potter's Printing	
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ine 9. Total Recei	ipts over \$50 (or listed above)			
	· · · · · · · · · · · · · · · · · · ·			
ine 10: Total Rece	sipts \$50 and under* (not listed above)			
ine 11: TOTAL I	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

eport all expen	ditures. Please include your com To Whom Paid	mittee name and a page number on	each page.)	T
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
3/17/23	Potter's Printing	Fall River, MA 02121	Yard signs	#310.89
		Line 12: Total Expenditures ov	er \$50 (or listed above)	
		Line 13: Total Expenditures \$50	and under* (not listed above)	
	Enter on page 1, line 4 -	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	#310.89

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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	mod ² Y	Line 12: Expenditures over \$50	0 (or listed above)	
		Line 13: Expenditures \$50 and	under* (not listed above)	
	Enter on page 1. line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
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	y and some some per	Line 15: In-Kind Contribution	as over \$50 (or listed above)	phonon many devictors and the destination of the control of the co
		Line 16: In-Kind Contribution	s \$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND (CONTRIBUTIONS	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
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